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**FRENCH EDITION
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The French edition of this Review is issued every month under the title of *Revue internationale de la Croix-Rouge*. It is, in principle, identical with the English edition and may be obtained under the same conditions.

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The Swing of the Pendulum

A hundred years in the development
of humanitarian law—1874-1973¹

by J. Pictet

We publish below the text of an address delivered at the formal centenary commemoration of the Brussels Declaration of 1874 concerning the laws and customs of war. This celebration took place in Brussels on 12 December 1974.

The concept that man must be protected against the ills of war is not a recent one. It may be likened to a clear spring gushing out from time immemorial, increasing gradually in volume as it surges forth until its swollen waters are borne down upon us today. The sum of efforts that idea has aroused has grown, parallel to the rise of civilization with which it is indissolubly linked.

The course of every civilization is marked by leaps and bounds; at times, there is a sudden quickening in the pace of its advance, which may be followed by periods of stagnation and temporary regression, like milestones, some white, some black, on the long road of mankind. One could imagine life on our planet as if it were under the sway of a gigantic, relentless pendulum, oscillating from one extreme to another. A similar phenomenon may be observed in the evolution of war, and again in the long series of successes and set-backs in the age-long struggle undertaken for the protection of the human person against the dangers of hostilities. These are but episodic engagements in the battle waged since the dawn of time between those who wish to preserve, to unite, to liberate and their opponents who wish to dominate, to destroy, to enslave, and may be

¹ The historical facts in this article were obtained mainly from the excellent work by the late Pierre Boissier: *Histoire du Comité international de la Croix-Rouge*, Paris, 1963.

seen as aspects of the eternal opposition between the instincts of “Eros” and “Thanatos”, of preservation and of destruction.

The history of Europe provides several instances of this dichotomy. In the Middle Ages, our life on earth was viewed as only a stage on our journey to the great hereafter; the value attached to life was not so great that its span on earth was considered to be worth prolonging. More importance was given to the saving of souls than of bodies and it was not the business of society to change the fate of human beings. While the religious orders set admirable examples of self-denying devotion, the masses remained cold to the afflictions suffered by their fellow-creatures.

The alliance of Church and State, on which the Edict of Milan set its seal in 313, gave birth to the medieval theory of the just war. This formidable myth, which introduced an emotional and esoteric element in the art of war, put a brake on the progress of humanitarianism for centuries. It led belligerents to pursue their combat to the point of utter exhaustion, as, in their zeal to have right on their side at all costs, they sought to vindicate their deeds by invoking faith, morality, justice or honour. It was on the basis of this article of faith that they justified all the many crimes committed during that period. The Crusades provided the most horrible instances of such acts.

In those times, wars were decided upon the issue of a single battle, after which those who had been thrown into the fight like pawns were forsaken. Happy the prisoner whose life was spared on payment of a ransom! The civilians were not treated more kindly and were thrown upon the mercy of the victors. As for the wounded, they were abandoned to a cruel fate, unless they were dispatched by a blow with a mallet.

Towards the end of the fourteenth century, there was a swing marking a turning-point in military history: the appearance of firearms made the dwarf a match for the giant. The new invention revolutionized the art of war and at the same time it caused a radical change in the social order. Cannons were dear and only monarchs could afford to have them made. Thus it came about that armies belonged to the king and consisted of mercenaries. The feudal system was succeeded by state power, and private wars and serfdom gradually disappeared. The release of prisoners on payment of a ransom became common practice; the wounded were taken care of and medical services worthy of the name were set up. The founders of natural law — Vitoria, Suarez and later Grotius — met with attention and their influence was deeply felt.

In the sixteenth and seventeenth centuries, however, armed conflict gradually degenerated into total war: blood flowed freely in a Europe ravaged by the wars of religion and the Thirty Years War. Living on pillage, in the territory of friend or foe, soldiers massacred the peasants, who were avenged when the tide of battle turned. To mention but one instance, the population of Bohemia in those sombre times fell from three million to seven hundred and fifty thousand.

But the spirit of scientific invention was stirring in the west. Man was probing the laws of physics which governed his universe and his own person. Life was becoming an end in itself, and from then onward, society took its destiny into its own hands. The "Age of Enlightenment" was dawning, and humanitarianism, the perfected and rational form of charity and justice, was slowly being evolved. Philosophers refused to accept that poverty was in the hands of Fate. Their goal was to gain the greatest sum of happiness for the greatest possible number. Jean-Jacques Rousseau uttered in 1762 those incontrovertible words: "war is a matter between States whose subjects are only their instruments. Once they have laid down their weapons, they are again men and no one may have any claim on their lives". The Genevese philosopher substituted for the ancient sophistry of the just war a concept which was to bear fruit: the distinction which has to be made between combatants and non-combatants, the foundation on which the law of contemporary conflicts has been erected.

In the eighteenth century, war became a matter fought out between professional armies consisting of a relatively small number of professional soldiers: civilians were no longer involved, because the troops were provided for by a quartermaster-general's department and looting was prohibited. War was an art, in which tactical manœuvres and strategy took the place of wholesale killing; ideally, the object was to gain a victory without causing any victims. It became a contest with its own set of rules, and though violations did still occur, they were more the exception than otherwise. The fate of prisoners was decided by "cartels", which were models of common sense and moderation, concluded between enemy commanders. Perfidious and cruel acts were banned, for it was considered they would be a provocation to the adversary. In short, war was kept under control by man's will.

On the evening of the Battle of Fontenoy, all the wounded, from both sides, were cared for by a well-organized medical service. If Henry

Dunant had lived then and had turned up at Fontenoy instead of Solferino, he would not have found anything to comment upon and still less would he have proposed the creation of the Red Cross.

The same ideas were taken up by the men of the French Revolution, who proclaimed that "prisoners of war are under the shield of the nation and protected by its laws", in exactly the same way as French citizens. But here it would seem the pendulum had reached the farthest point of its swing. Attacked by half the countries of Europe, France introduced compulsory military service for all its subjects. Wars acquired, because of conscription and technical developments, "unbridled ferocity", to paraphrase Marshal Foch's expression: "allure déchaînée de la guerre". Whole nations were set against each other. As this was not accompanied by advances in the organization of medical services, the death rate in the wars of Napoleon I was truly frightful. The prospect behind all the outward glory was grim. Cartels sank into oblivion.

In the second half of the nineteenth century, there was no improvement at all in this grievous situation. During the campaigns in the Crimea and in Italy, sixty per cent of the wounded did not survive.

But history once again was to witness a change. Sense prevailed in the nineteenth century! It turned out to be a great period in world history and was to see the abolition of slavery and the birth of the movement towards social consciousness, of universality and of the Red Cross.

It was thus that the time was ripe for Henry Dunant, as the witness of the mournful aftermath of one of the most murderous battles of that period, to make his moving appeal: a soldier who is disabled is no longer an enemy; he is just an ordinary man losing blood, and the blood that flows in every man's veins is always red; he and those who go to his assistance ought to have the benefit of "neutrality", to use the expression of the time; and Dunant's brilliant idea was that assistance ought to be organized in peace-time. The Red Cross and the Geneva Conventions blossomed from this seed; the protective emblem was created.

Though at first the Red Cross was concerned only with wounded soldiers, it gradually spread its protective mantle to other victims of conflicts: the shipwrecked, prisoners of war and civilians. In addition, the Red Cross Societies, finding it irksome to remain idle in between hostilities, turned their attention to good works in time of peace: the care of the sick, hygiene, aid in cases of natural disasters. In a relatively short

time, the activities of the Red Cross were to encompass relief of nearly all the forms of human suffering.

Similarly, the first Geneva Convention of 1864 for the protection of wounded soldiers gave impetus to the whole of humanitarian law, as well as to the law of war, codified at The Hague. It was even, in some measure, at the origin of the powerful movement for the settling of conflicts by peaceful means and the maintenance of peace, undertaken first by the League of Nations and today by the United Nations. With the Geneva Convention, the States relinquished, for the first time at international level, a part of their sovereignty for the benefit of private individuals. For the first time, the use of arms yielded to the rule of law. Henceforth, war would no longer mean the unleashing of unbridled violence.

The first conflict during which the Convention was fully applied was the Serbo-Bulgarian war in 1885, which consisted nevertheless in a number of fierce engagements. In the early stages, the Serbian Army penetrated into Bulgaria, but then was forced to retreat as a result of a military movement which has since become famous. In the retreat, numerous wounded were left on the field, but the medical detachments remained behind with them, the victims were cared for without distinction, and medical personnel were allowed to cross the lines. The death rate of the wounded fell to two per cent. It should perhaps be added that the Red Cross and the Convention were not alone responsible for this low figure, for thanks to Pasteur's discoveries, aseptic treatment had just been introduced. But States had come to understand that humanitarian law was to the advantage of all, and henceforth this was no longer disputed by anyone. In 1906, a Diplomatic Conference conferred upon the Geneva Convention its full satisfactory form.

What was the situation in the meantime on "great Neptune's ocean"? Progress was slower, for conditions at sea were stern. The founders of the Red Cross had realized that there was a need to adapt to naval operations the principles of the Geneva Conventions. But this idea was rejected by the 1864 Diplomatic Conference, because it was felt that adequate information on the form naval warfare might take in the future was wanting. The navy was just going through the greatest changes in its history, and warships were being equipped successively with steam, the propeller and armour-plating.

The lack of clauses relating to naval operations became tragically apparent at the battle of Lissa in 1866, which could be likened to a

“maritime Solferino”. The International Committee of the Red Cross (ICRC) decided to prepare a draft containing additional articles to the 1864 Convention, concerning more particularly the navy, and these were submitted to a Diplomatic Conference convened in Geneva in 1868. However, the text was not ratified, and the new provisions, embodied in one of the Hague Conventions, did not enter into force until 1899, the year after another disaster, a naval engagement off the Cuban coast during the Spanish-American War of 1898. The articles on naval warfare then took their rightful place in international law.

This brings us to the question of the law of war properly so called, also known as the Law of The Hague. But its first chapter was written at St. Petersburg in 1868. It was here that, in connection with the prohibition of explosive bullets, its basic principles, which are still in force today, were laid down. Its second chapter was drafted at Brussels, in the course of the memorable Conference which we are commemorating today.

The ground having been cleared and the way opened by such eminent persons as Francis Lieber, Gustave Moynier and Jean Gaspard Bluntschli, the first Peace Conference, as it was called, met at The Hague in 1899 at the invitation of Tsar Nicholas II. The loftiest hopes were raised: there was talk of general disarmament and of a new era in the history of mankind. But there were some who thought that these ideas were but vain dreams.

In addition to prohibiting weapons which might have come straight out of the pages of science fiction, like “projectiles discharged from balloons” and asphyxiating gases, it was decided to ban dum-dum bullets, which were certainly quite real and caused ghastly wounds. But the Conference’s main task was to draft the “Regulations respecting the Laws and Customs of War on Land”, which drew extensively on the Declaration of Brussels and the Oxford Manual. The scope of the Regulations should not be under-estimated and the conduct of military operations is still governed by a good number of their provisions. Some of these have retained even today their significance, for example, those relative to the opening and end of hostilities, the status of combatants, surrender, the respect of “open towns”, the prohibition of certain weapons. Tribute should be paid to the foresight of statesmen like Frédéric de Martens, whose rightly celebrated “clause” would alone have been sufficient for his name to be kept alive.

The Hague Regulations also contained the essential rules concerning the treatment of prisoners of war, for whom Henry Dunant had devoted praiseworthy efforts and for whose benefit the ICRC had set up during the 1870 war the first Central Prisoners of War Agency. There are, too, some provisions in the Regulations on the protection of civilian inhabitants of occupied territory. In 1929 and 1949, both these questions were included in the Law of Geneva.

But just as the pendulum had risen to its highest point, it started to swing back. Science, coupled with technology, placed in the arms of Mars the resources of industry increased tenfold and unprecedented means of destruction. The armaments race was intensified by the mobilization of all the means available in each country.

The two episodes of the world war, separated by a twenty-five year interval, caused more suffering and destruction than any other conflict. Amid apocalyptic scenes of horror, the end of our world might have seemed to be drawing near.

When the bells rang out at last for peace, in the midst of ruins, it took a long time for humanity's wounds to heal. Abominable doctrines had kindled man's disregard for man; there lay that fiendish venom for something was bound to remain, even in peaceful minds. Men had got accustomed to violence; death was a commonplace occurrence and was nothing more than an item in vital statistics.

The rule of law was quick to lift its head after the nightmare of the war. Under the banner of the United Nations, the organization of peace was set in motion and the legislation relating to human rights began to be developed. The years 1948, 1949 and 1950 are shining milestones in contemporary history. The year 1949 marked the meeting of the Diplomatic Conference which shaped and expanded the Geneva Conventions to their present form. Following a holocaust of unprecedented dimensions, it was felt it was essential to revise and supplement the fundamental charters of humanity in the light of recent experience. The ICRC therefore took up the challenge, following the method it had already used, which consisted in gathering a vast amount of material and then drawing up draft rules with the aid of international experts. The question was whether detailed codification was better than the formulation of general and flexible principles. The ICRC was in favour of the second solution but it was the first which was eventually adopted, because the plenipotentiaries were thinking of specific cases where their own

country had suffered and wished to see those cases dealt with explicitly.

The monumental work represented by the 1949 Conventions consisted of four diplomatic instruments. The first was none other than the “parent Convention” relative to wounded soldiers, adapted to suit contemporary trends. Some critics pointed out that from a humanitarian viewpoint it was a step backward, and they indicated that it confirmed the retention of medical personnel, that it abandoned the principle of the restitution of vehicles and material, and that it restricted the use of medical aircraft. They were not entirely wrong. However, what may have appeared, in absolute terms, to be a regression must be occasionally viewed, in the context of the evolution of the methods of war, as a relative advance. The Conference wished to take a realistic stand and was on its guard against utopian wishful thinking.

The provisions of the Second Convention, relative to armed forces at sea, for the first time had their counterpart in the First (land forces) Convention, and the articles followed each other in a strictly parallel order. A number of points, which formerly had been somewhat obscure, were clarified. Some people may even consider the Second Convention to be more humanitarian than the First, since the principle that medical personnel were exempt from capture was retained to a greater extent than on land, in view of the special conditions prevailing at sea.

The Third Convention dealt with prisoners of war. At this point, we should go back a little. The Hague Regulations contained only seventeen articles on prisoners of war, and provided that information regarding prisoners of war would be communicated to the government to which they belonged only after the conclusion of peace! No one had thought of their families and of the state of mind they would be in.

When the First World War broke out in 1914, the ICRC, without the support of any legal authority, set up the Central Prisoners of War Agency and thus familiarized people throughout the world with the “International Red Cross”, as it had already become known at the time. This was followed by sending neutral delegates to the camps to distribute comforts. The delegates made it a practice to describe in their reports what they saw in the camps every time they brought parcels. Gradually this developed into regular inspections of places of detention and was found to be best method to curb the absolute authority of the detaining

Powers. It could be said that control over the application of the Conventions came into existence spontaneously.

All these improvised operations provided a framework for the Geneva Convention of 1929, which laid down the rules relating to captivity in wartime in all its different aspects. It was the 1929 Convention which governed the condition of millions of prisoners during the Second World War. Its effectiveness may be gauged from the fact that, where it was enforced, the death rate did not exceed the normal ten per cent throughout the conflict, while in those camps for prisoners of war or political detainees where legal protection was lacking it varied between forty and ninety per cent.

The 1949 version did not greatly differ from the preceding one. The main improvement lay in the extension of the category of persons who, when captured, would have the right to claim prisoner-of-war status. That was the intention of Article 4, which is very much the key to the Convention. It solved, at least partially, the difficult problem of "partisans", who thereby enjoyed treaty protection provided they met the well-known "Brussels conditions" applied until then to militias and volunteer corps. The provisions regarding work and penal sanctions were extended, and repatriation of prisoners was no longer to take place after the conclusion of peace but "without delay after the cessation of active hostilities".

We now come to the Fourth Convention of 1949, which was an entirely new text. The First World War had exposed the glaring inadequacy of the rules for the protection of civilians. The ICRC had proposed in 1929 to lay down the status of civilians at the same time as that of prisoners of war. But objections were raised that the time was inappropriate and even—rather hypocritically—that action of this sort would constitute a betrayal of the cause of peace!

Soon after, the ICRC prepared a draft Convention which was adopted in 1934 at Tokyo by an International Red Cross Conference. But the Diplomatic Conference that should have accorded it official sanction was convened only for 1940. It was too late: in the meantime, war had broken out. Millions of persons were under the threat of deportation, atrocities of the most ruthless type, and death.

In 1945, the work of revising the Geneva Conventions was overshadowed by the urgent need to extend their protection to civilians. This was to be a much more difficult undertaking: it was no longer a question

of grouping under one definition a limited, organized and clearly ordered class of persons like the army; one was now dealing with a shapeless mass of civilians spread over the whole territory. Besides, it was not enough to protect the victims of conflicts; what was required was to prevent these persons from becoming victims. As Max Huber put it, "we were coming to grips with war itself, since it was no longer a case of alleviating suffering, but of removing its causes at their source". Furthermore, unlike the wounded and prisoners of war, civilians in most cases were not incapable of causing mischief.

Under the new Convention, the internment of civilians could be ordered by the appropriate authority only in the case of imperative security requirements, and the decision had to be periodically reviewed. All persons deprived of their liberty were to benefit from a status similar to that enjoyed by prisoners of war, and their camps were to be open to visits by representatives of the protecting Power and of the ICRC. The inhabitants of an occupied country were to be allowed, as far as possible, to continue to lead a normal existence. Deportations and the taking of hostages were strictly forbidden. But it must be admitted that the Convention, despite its title, could protect civilians only against the abuse of authority by the enemy Power and not against the use of weapons.

But the most significant improvements in the 1949 texts were in connection with their general provisions. It was first necessary that the Conventions should be applicable not only in cases of regularly declared wars, but as soon as there were *de facto* hostilities. Cases of "peaceful occupation" also had to be covered. This was achieved by means of Article 2.

There was a still more difficult problem: how to ensure the application of humanitarian law, or at least its essential provisions, in conflicts not of an international character, that is to say, for the most part, in civil wars? The matter was of paramount importance and would suffer no delay, for the Conventions so far had been silent on this point, even though these conflicts, where personal hatreds were let loose, caused more suffering than others. But, needless to say, there was strong opposition from States, basing themselves on the principle of national sovereignty. After several months of discussions, the Diplomatic Conference adopted common Article 3 which, in itself, could be likened to a "Convention in miniature". It provided that, in non-international conflicts, all parties must apply unconditionally the great principles of humanity: the respect

of persons placed *hors de combat* or those not taking part in the struggle, the prohibition of torture, of the taking of hostages, and of sentences and executions without fair trial. But there was nothing to prevent the trial of those who took up arms to overthrow the Government. Three further points should be mentioned: the parties to a conflict were invited to enter into agreements laying down provisions in excess of the minimum stated; the ICRC could offer its services, and, as a necessary sop to the susceptibilities of States, the "application of these provisions shall not affect the legal status of the parties to the conflict". Such was this article which was truly revolutionary in relation to classical international law, and which has rendered signal service in numerous internal conflicts.

The great innovation in the 1929 Convention relative to the treatment of prisoners of war had been the organization of the control of its application. This was entrusted to "Protecting Powers", namely, to those neutral States whose duty it was, in accordance with customary law, to represent the interests of a belligerent in its adversary's country. The choice was judicious, because two essential conditions were united: neutrality and officiality. This control was supplemented by the provision for visits by ICRC delegates to prisoners' camps.

The Protecting Powers greatly contributed to the improvement of the condition of prisoners during the Second World War. But the dreadful truth must be stressed, that seventy per cent of the prisoners of war were without the services of a Protecting Power. The existence of such a Protecting Power was subject to the approval of the State on whose territory it was to discharge its mission and to the recognition by that State of the mandatory Power. But in many cases approval was not granted, and it was the ICRC which tried to fill this very serious gap.

It was therefore vital, in 1949, to pay attention to the eventuality of a substitute for a Protecting Power which would not be able to function, for any reason whatsoever. The Conference provided that, in such case, the detaining Power should have recourse to a substitute, such as the ICRC.

It should be mentioned that in most of the conflicts that have broken out since those instruments were signed, no Protecting Powers were designated. This did not mean that the system was not a good one, for the fact is that the majority were internal conflicts while in the others the States did not make any attempt to designate a Protecting Power for political reasons, for instance because they were unwilling to recognize their adversary, an apprehension which would appear to be unwarranted.

Such is the version at present in force of the Geneva Conventions; which remain worthy of the tradition on which they repose. But, despite their extension in 1949, they do not yet fully cover the whole field of human suffering, besides which twenty-five years have since elapsed and shortcomings have been detected. Furthermore, while the Law of Geneva has been carefully developed, the same cannot be said of the Law of The Hague, for most of its rules go back to 1907, when air bombing had not yet been contemplated. The ICRC, with the support of the entire Red Cross and of those governments and private circles working towards a better protection of the human person in time of conflict, therefore undertook to initiate a new stage in the development of humanitarian law. The first Diplomatic Conference was held this year; a second session is scheduled for the next.

There are therefore good reasons to be hopeful. But there are also reasons for misgivings. Too often nations take into account their own immediate interests and remain incapable of raising their outlook to world level and to the true maintenance of peace. The world of today is characterized by a more rigid mentality and by a decadence in international morality. Struggles are waged with hatred and fanaticism; the more passion enters into conflicts, the less is the rule of law applied. A frightful escalation of violence is developing. Acts of terrorism, committed against innocent persons, which are nothing but crimes, are labelled acts of war by some. And even in time of peace, it may happen that citizens who oppose a political regime are treated worse than captured enemy soldiers, are summarily detained, and are at times tortured or executed without trial. Finally, developments in nuclear physics have completely revolutionized military considerations. Scientists are dispassionately studying the means of destroying whole cities in one single blow, just by pressing a button!

Whither now, and in what direction will the fateful pendulum's swing take it? Shall the world make the rule of law predominate, or will our civilization destroy itself? That is the dilemma before us. It is for us to decide.

Jean PICTET
Vice-President
of the ICRC

Constance Teichmann

A Great Lady of the Red Cross

by Carl Vandekerckhove

The author of the article printed below, last year published, as part of a collection in Dutch commemorating major figures of the Red Cross, a lavishly illustrated booklet on Constance Teichmann, whose life was a model of service to suffering humanity.¹ He has been kind enough to provide a summary of the booklet's contents for our readers. We would like to thank him for this, and to point out that he is at present preparing a work on Henry Dunant which will be the first on the subject to be published in the Dutch language. (Ed.)

One hundred and fifty years ago, on June 16, 1824, Constance Teichmann was born in Antwerp. Her father was governor of the Province of Antwerp. Her mother was very active in social work: she founded a society to provide for needy widows, and an association of Christian mothers; she helped to establish nursery schools, Sunday schools and schools of lacemaking, and she set up an orphanage for girls.

The governor's residence, besides being the focus of fashionable society, was the centre of artistic and philanthropic activities. Balls were succeeded by meetings of charitable organizations, concerts alternated with exhibitions. While her sisters were happy to follow the dictates of the social round, Constance was more interested in art and in cultural and charitable activities.

¹ Carl Vandekerckhove, *Leven en werken van Constance Teichmann*, Red Cross, Belgium, Brussels.

Her diary reveals that her selflessness and ardour sprang from deep humane and religious convictions. From childhood, she longed to enter a religious order. Her parents did not actually refuse their consent, but instead astutely guided her aspirations in another direction, by helping her to satisfy her need to be of service. With their encouragement, Constance joined the "Society of Ladies of Charity", in order to devote herself to the poor. One year later, she rented a house so that she could nurse poor children who were sick. This became the Children's Hospital, where the number of beds rapidly increased until it was more than three hundred.

Constance also had a great affection for the Flemish people, and in particular encouraged Flemish artists: Peter Benoit, Hendrik Conscience, Van Duyse, August Snieders and Edgard Tinel all had the joy of being understood and sponsored by her.

But her principal task, the one nearest her heart, was nursing her young patients. On July 25, 1877, she acquired more spacious premises and set up two special clinics, one for eye diseases, the other for conditions of the ear, nose and throat.

On July 22, 1886, she was made a Chevalier of the Order of Leopold I, on the fortieth anniversary of the foundation of the Children's Hospital. In 1896, on the fiftieth anniversary, she received a supreme tribute: through the city passed a procession of tableaux formed by various groups from Antwerp and the surrounding area, portraying (to quote the programme) "her self-sacrifice, her tenderness, her talent, her dedication, her tenacity, her heroism, her kindness, her perseverance, her courage, her modesty".

The vessel placed in quarantine

But to go back thirty years. On May 13, 1866, the German ship "Agnes" was placed in quarantine in the harbour of Antwerp: an epidemic of cholera had broken out on board. Before long, the whole country was swept by this scourge.

At that time, the city on the Scheldt had no more than 123,000 inhabitants; 4,892 of them fell victim to the "black death". This time of trial was remembered by the people of Antwerp above all for the exemplary conduct and sublime self-sacrifice of Constance Teichmann.

As soon as she heard the terrible news, she went, with two priests, to the death ship and remained there to nurse the cholera cases. Later, most of the stricken crew and passengers were transferred to a fort, where she was unsparing of her efforts to help the sick and comfort the dying. Hardly had her work there come to an end than she went to nurse more than three hundred children who were suffering from the disease. It was two months before the epidemic was stamped out.

The people of the city which had known such distress bestowed on its nurse the title of "the Angel of Antwerp" for her heroic conduct.

In the service of the Red Cross

A section of the Red Cross was founded in Antwerp in 1867. Constance Teichmann immediately got in touch with the institution, whose ideals she shared.

In July 1870, when the Franco-Prussian War had broken out, the Central Committee of the Red Cross made a moving appeal to the population to help the victims of the conflict. Constance at once responded to this appeal. On August 24, a Belgian ambulance left for Saarbrücken. On arrival there, Constance noted in her diary for August 28: "Today I put on my Red Cross armband for the first time".

Throughout her stay in Saarbrücken, she devoted herself unreservedly to the sick and wounded, making no distinction between nationalities in nursing them. Wherever the medical team went, the ambulance moving on as the fighting front changed position, she was brought face to face with the same horrors: amputations carried out without or with only rudimentary anaesthetics, suppurating wounds, infections, parasites, stench and foul air, patients crying out in pain or delirious with fever, at times no medicines or dressings, shortage of beds and even of food. More and more, Constance became aware that she was not merely a member of the Red Cross, she was herself "the Red Cross in action".

In letters to her family she stated, in moving terms, her aversion to war as the scourge of humanity; but she found pleasure in giving families the news that "her patients" were recovering. The severely injured she helped to readapt, admittedly to the life of a handicapped person—but to life!

She noted with emotion each time either of the belligerents showed respect for the Geneva Convention. She took this, rightly, as a proof that the Red Cross, then only in its seventh year, was recognized by governments as an absolute moral authority. She triumphantly quoted examples.

Not mentioned in Constance's letters home was the fact that the sick bay had many patients with typhus or dysentery. Many were the soldiers who died in her arms. Some of them, in the delirium of death, thought that she was their mother, and died murmuring "Maman" or "Mütterlein", comforted at the last.

At Saarbrücken, and later, at Metz and at Cambrai, she gave of her best. The Baroness de Crombrugghe, in her book, "Diary of a nurse during the war of 1870-71", wrote: "The unfortunate patients blessed those devoted women to their last breath. Mademoiselle Teichmann, whom the most charitable and the most intelligent of hospital sisters might perhaps equal, but could certainly never surpass, either in devotion or in selfless acts of every kind, gives the finest physical and spiritual care to the patients in need. Always at the disposal of those among our nurses who seek her help or advice, she is constantly at hand for any task and any person. Her experience is most valuable to us".

After the end of hostilities, on February 27, 1871, Constance Teichmann and her fellow nurses left France and returned to Belgium. Constance's sister described the return in the following words: "Long before she was near to us, she held out her arms to us. At Namur, another group of the family welcomed us, and at midnight we reached Antwerp, where the staff had decorated the house with little Red Cross flags".

Death of Constance Teichmann

After the jubilee celebrations in 1896, her state of health deteriorated, and on December 14 she died. News of her death spread like wildfire through the city. Rich and poor flocked to her house from all sides: the grateful population wished to pay its last respects to her. On December 17, the day of her funeral, countless men, women and children from all levels of society demonstrated their deep gratitude to the "Angel of Antwerp".

In the church of Saint Eloi, in Antwerp, a great monument was erected to her memory. Two reliefs illustrate the culminating moments of her life of charity: her aid to the wretched outcasts suffering from cholera on the Scheldt, and her Red Cross mission during the Franco-Prussian War of 1870-71.

The Belgian Red Cross can be proud of this great lady of the newly founded Red Cross. But Constance Teichmann reminds us also of the dedication and sacrifices of the pioneers of our institution. At a time when the whole world looked with scepticism on the "humanitarian dream" of Henry Dunant, and many people were convinced that this dream would vanish like a bubble at the first thrust of a bayonet, these pioneers helped to ensure that brotherhood was not entirely banished from the field of battle.

Carl VANDEKERCKHOVE
Director General
Belgian Red Cross
(Flemish section)

INTERNATIONAL COMMITTEE OF THE RED CROSS

EXTERNAL ACTIVITIES

Africa

Ethiopia

The offer of services of the International Committee of the Red Cross to the Ethiopian authorities when trouble broke out in Asmara at the end of January, confirmed by a cable sent by the President of the ICRC Executive Board on 9 February to the Head of the Provisional Military Government, is still being considered in Addis Ababa.

In addition to this offer from the ICRC, the Ethiopian Government is studying a report drawn up by the Ethiopian Red Cross, which was authorized last week to go to the capital of the province of Eritrea to survey the situation and the humanitarian needs.

Two ICRC delegates, one of them a doctor, have been in Addis Ababa for several weeks. They were joined on 10 February by the ICRC delegate-general for Africa, who returned to Geneva on 15 February after various contacts with the Ethiopian authorities and Red Cross.

Mali and Upper Volta

Following recent incidents that took place on the border between Mali and Upper Volta, an ICRC regional delegate for West and Central Africa went to the Republic of Upper Volta from 22 January to 1 February 1975 and to the Republic of Mali from 1 to 11 February 1975. In each of those countries, the regional delegate conferred with the Head of State and the principal ministers concerned on the humanitarian questions raised by the conflict. In Mali he visited two nationals of the Upper Volta made prisoner of war, and in Upper Volta he saw four Malian civilian internees. He also visited in the latter country fourteen persons under police surveillance who were released that same day. In

every place of detention, the ICRC delegate spoke to the prisoners without witnesses and transmitted to them family messages. This mission was carried out with the assistance of the Red Cross Societies of both countries.

Togo

Visits to places of detention .— From 28 January to 6 February 1975, one of the ICRC regional delegates visited the seven main prisons of the Togolese Republic, namely, at Dapange, Mango, Lama-Kara, Sokode, Atakpame, Anecho and Lomé. He talked with inmates of his choice without witnesses and handed over relief supplies consisting of medicaments to the infirmary of each of the prisons which he visited.

Latin America

Chile

During January 1975, ICRC delegates in Chile visited forty-four places of detention and altogether saw some 6,500 detainees, of whom over 2,200 were being held by order of the military authorities. Medicaments were distributed by the ICRC in sixteen places of detention.

From September 1973 to the end of January 1975, the ICRC carried out 389 visits to 125 places of detention, both civilian and military.

Aid to the families of detainees was continued in January. In Santiago 885 families, and in the rest of the country 1,800 families, received assistance. Purchases for this purpose amounted to 22,000 US dollars. A large quantity of articles held in stock by the ICRC in Santiago, including ten tons of powdered milk, miscellaneous foodstuffs, clothing and toilet articles, were distributed to those families.

Asia

Khmer Republic

More refugees flock to Phnom Penh. — Owing to renewed fighting in the Khmer Republic, more and more civilians have fled from the outer zones around the capital to seek refuge in the city centre. To cope with this situation, the International Red Cross Assistance delegation, in co-operation with the Khmer Red Cross, has stepped up its programme (distribution of medicaments, foodstuffs, clothing, blankets, etc.).

The medical teams have been working unremittingly in Phnom Penh and in the provinces. Two surgical teams are at present operating in Kompong Chhnang and Phnom Penh hospitals, where civilian and military casualties are taken. Three further teams, including one specializing in nutritional problems, are making regular visits to displaced person camps, and a paediatric team is continuing its work at the Kantha Bopha hospital in Phnom Penh.

Visits to places of detention. — On 21 January, ICRC delegates in the Khmer Republic began a new series of visits to places of detention in Phnom Penh and the provinces. They talked in private with the detainees (mainly prisoners of war) who received various relief supplies and were examined by the medical delegates.

Laos

The International Red Cross Assistance delegate in Laos went several times during the last few weeks to Ban Kok Van, a village close to Luang Prabang, where the Lao Red Cross is attempting to settle about a thousand displaced persons. With a view to facilitating their resettlement he distributed various items, including seeds, agricultural implements and building tools.

Republic of Vietnam

From 4 to 6 February 1975, ICRC delegates in the Republic of Vietnam visited the prisoner-of-war camp at Can Tho.

Philippines

Following a mission by its regional delegate last December in the southern area of the Philippines, the ICRC sent 10,000 Swiss francs to the National Red Cross Society, to finance part of the Society's programmes in aid of refugees who fled from the areas where incidents had taken place.

Singapore

The ICRC regional delegate for South-East Asia was in Singapore from 27 to 30 January. He visited three places of detention, where he saw about forty political detainees with whom he spoke without witnesses.

Europe

Cyprus

In January, the 15 ICRC delegates in Cyprus, and the three medical teams provided by the National Red Cross Societies of Denmark and Ireland pursued their activities for the benefit of Greek and Turkish Cypriot minority groups.

The work of the delegates mainly consisted in registering people liable to be transferred to another zone, tracing missing persons, transmitting family news and distributing relief. The medical teams continued to provide medical care to persons in remote districts and to transfer serious medical cases to hospital.

In the south, the ICRC has compiled a list of all Turkish Cypriot villages and made surveys of the health and food situation facing the inhabitants of those villages which were visited.

In the north, although certain travelling restrictions are still in force, the delegates and medical teams regularly visited the Greek Cypriot localities, especially those in the Karpas area and in the Kyrenia and Morphou regions.

By the end of January 1975, the ICRC delegation in Cyprus had distributed or handed over to the authorities 30 tons of medicaments, 50 tons of powdered milk, 60 tons of baby foods, 335 tons of protein-enriched food, 160,000 blankets, 9,700 tents, 15,000 camp-beds, and other miscellaneous relief supplies.

Middle East

Thirtieth series of prison visits. — During the last three months of 1974, the ICRC carried out its thirtieth series of visits to prisons in Israel and the occupied territories. Its delegates went to thirteen places of detention and saw about 2,700 civilian detainees from various Arab countries and from the occupied territories.

The ICRC is authorized to see, usually about a month after they have been arrested, those known as “security” prisoners—whether sentenced, on remand or detained under an administrative order—and penal law prisoners—sentenced or held on remand. Arab detainees of Israeli nationality are not visited by ICRC delegates as they do not fall under the category of persons protected by the Fourth Geneva Convention.

Reuniting of families. — A family reuniting operation took place under ICRC auspices on 29 January on the El Qantara road, in the United Nations buffer zone between the Gaza-Sinai occupied territory and the Arab Republic of Egypt. It enabled 174 persons to cross into occupied territory and 241 to cross over into the Nile Valley.

Visit to an Israeli prisoner of war. — On 10 and 24 January and on 8 February 1975, an ICRC delegate in Beirut visited an Israeli prisoner of war captured by the Lebanese authorities on 2 January 1975. ICRC delegates talked in private with the prisoner and handed him some of his personal belongings. He was repatriated on 17 February.

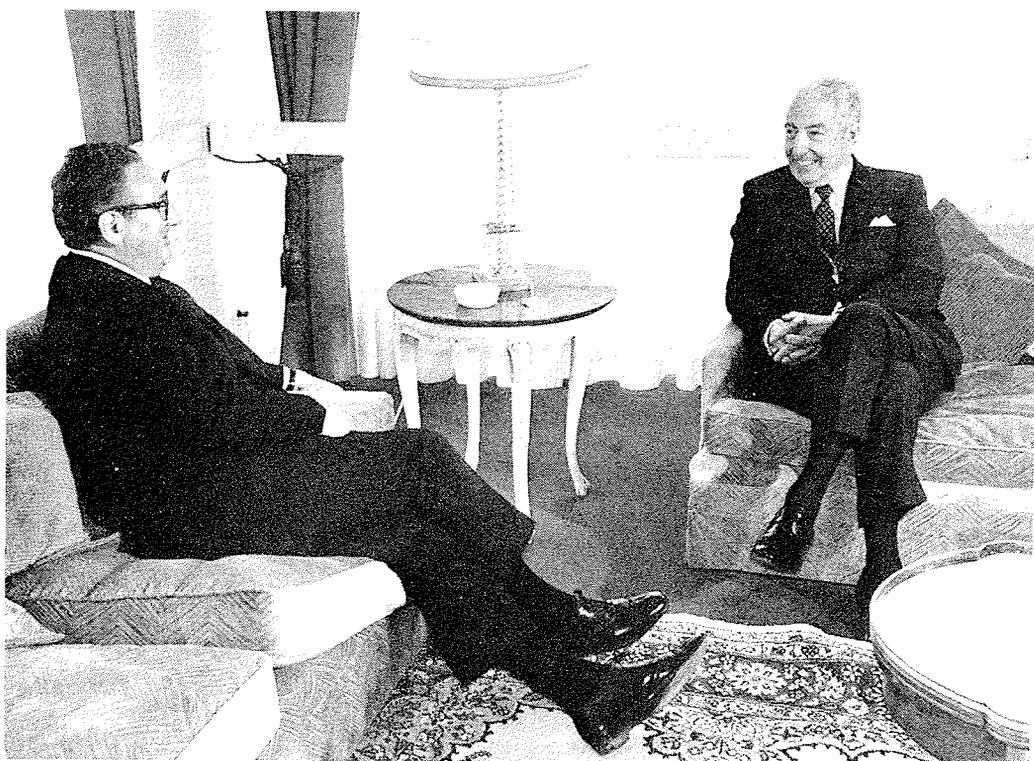
Kafr Shouba cease-fire. — At the request of the Lebanese authorities, the ICRC approached the Israel government for a truce to be arranged in the area around Kafr Shouba in southern Lebanon, which was the scene of severe fighting. A truce was then called on 15 January 1975, when a number of casualties were evacuated by the Lebanese Red Cross. During a second truce on 21 January, the personal belongings of the inhabitants who had fled were collected and taken away in a convoy of thirty lorries.



Khmer Republic: A National Red Cross and "International Red Cross Assistance" dispensary.



Rhodesia: distribution of relief supplies sent by ICRC to the inhabitants of a "protected village".



Geneva: The American Secretary of State, Mr. Kissinger, meets Mr. Gallopin, President of ICRC Executive Board (*right*).

Photo Vaterlaus CICR

Riyadh: Seventh Conference of Arab National Red Crescent and Red Cross Societies.



*IN GENEVA***Mr. Gallopin meets American Secretary of State**

On 17 February 1975, the President of the ICRC Executive Board, Mr. Roger Gallopin, met the American Secretary of State, Mr. Henry Kissinger, while the latter was on a visit to Geneva. The talks centred on the ICRC's humanitarian work throughout the world. The Secretary of State expressed the United States Government's appreciation of the tasks accomplished by the ICRC and, in particular, its efforts to promote international humanitarian law.

ICRC Publications

A *Catalogue of Publications (1864-1975)* has just been issued by the ICRC. This is a 40-page booklet listing titles of publications issued by the ICRC in the course of over a hundred years and which are not out of print; a number of works printed by other publishers have also been included. Titles are classified under the following headings: History of the Red Cross—Principles—Organization—Development of Humanitarian Law—Dissemination of the Conventions—General Information—ICRC Activities. Most of the titles listed have been issued in English, French and Spanish and some of them in other languages, mainly Arabic and German.

This Catalogue may be obtained from the ICRC Documentation Service. In addition, the *Table des matières de la Revue internationale (1939-1961)* is also available from the Documentation Service, and a continuation of this list (after 1961) is now being prepared.

**THE NEW RADIO STATION
OF THE INTERNATIONAL COMMITTEE OF THE RED CROSS**

The new radio station of the International Committee of the Red Cross is installed in a small building in the countryside at Versoix, some 10 kilometers from Geneva, in a field from which rise four lofty antennas.

The station was inaugurated on 4 December 1974 with a direct conversation between Mr. Eric Martin, President of the ICRC, and Mr. Walter Bargatzky, President of the German Red Cross in the Federal Republic of Germany, who was inaugurating his Society's radio station at the same time.

The need had long been felt for the ICRC to improve its system of radio communication, which is vital for the speed and effectiveness of its activities in the field. The two transmitter-receivers and the single antenna which still constitute the headquarters radio station had clearly become inadequate, and the proximity of several industrial and administrative buildings sometimes impaired seriously the quality of radio contacts.

The headquarters station continues to operate on some days, but the bulk of the radio traffic between the ICRC and its various delegations is now handled by the new station at Versoix. This station—with three automatic transmitter-receivers, each of which can operate on ten frequencies, and with three directional and two omni-directional antennas—can transmit and receive on all wave-lengths between 2 and 30 megacycles. All the equipment was installed by the ICRC telecommunications staff which had worked for nearly four years in planning the new station and transferring equipment from Geneva to Versoix.

* * *

The ICRC radio system has had a career of ups and downs ever since it was established some 15 years ago.¹ It was decided at the administrative conference on radio communications, at Geneva in 1959, that the Red Cross should have an independent system, to link the various National Societies and connect them with the Red Cross institutions in Geneva.

In 1963, the Swiss telecommunications administration granted the ICRC a licence to establish and operate a radio station. At the end of the same year, daily communications were established with the field hospital at Uqhd, in the heart of the Yemen desert. Apart from its practical use, this first link contributed to relieving the feelings of isolation and loneliness of the medical teams who were working and living hundreds of miles away from civilization. Station HBC-88 of the International Committee of the Red Cross had come into being. To help understand the real significance of this new and useful instrument for the ICRC, it is instructive to read again the article published by *International Review* in December 1964:

At the foot of the rocks, worn smooth by the desert winds and burning to the touch, the surgeons of the ICRC field hospital at Uqhd in the Yemen are consulting each other about a wounded case. The X-ray apparatus has just broken down and it will not be possible to operate. How many days will pass before the news reaches Geneva and how many weeks before spare parts are received ?

One of the ICRC's short-wave transmitting and receiving posts installs its antenna above the camp. At the headquarters of the International Committee in Geneva the main station is on watch and soon wireless engineers collect around the microphone. They ask questions, detect the fault and give instructions to the electrician who, 3000 miles away, then manages to make the necessary repairs. The surgeons can now continue to operate and save lives.

Many other examples could still be found on looking through the log-book of HBC 88, the ICRC's main station, where a series of rapidly transmitted abbreviations summarizes the lives of these teams which bring the Red Cross to all the corners of the world. Swift action has to be taken since the victims of conflicts and disasters cannot be kept waiting. Appeals and replies cross each other with lightning speed. Now delegations are no longer isolated and they can maintain direct contact with the International

¹ *International Review* has published several reports on the development of the ICRC's radio communications system. See in particular the issues of January 1971 and March and November 1972.

Committee, inform it of their needs and receive instructions, wherever they may be. To-morrow, a world network of emergency Red Cross radiocommunications will ensure the immediate transmission of messages and the effective organizing of relief.

During the conflict in Nigeria, the ICRC supplemented its equipment with the acquisition of a second station of the type used by radio amateurs or "hams". These were pioneering days for those who were trying to develop the most direct and quickest means of contact to carry out the organization's humanitarian mission. Out in the field, delegates often had to turn themselves into radio amateurs to contact Geneva from the most faraway spots. Upon these makeshift radio connections, we must remember, thousands of lives depended. This early experience provided the ICRC with invaluable guidance as to the kind of material it should have. Thereafter, it acquired standard commercial equipment for the principal station in Geneva and several sets, weighing less than 70 pounds (including the antenna, generator and accessories), which delegates and doctors could learn to operate in a very short time. These sets are still part of the essential equipment for the first ICRC team sent to the scene whenever a new conflict breaks out.

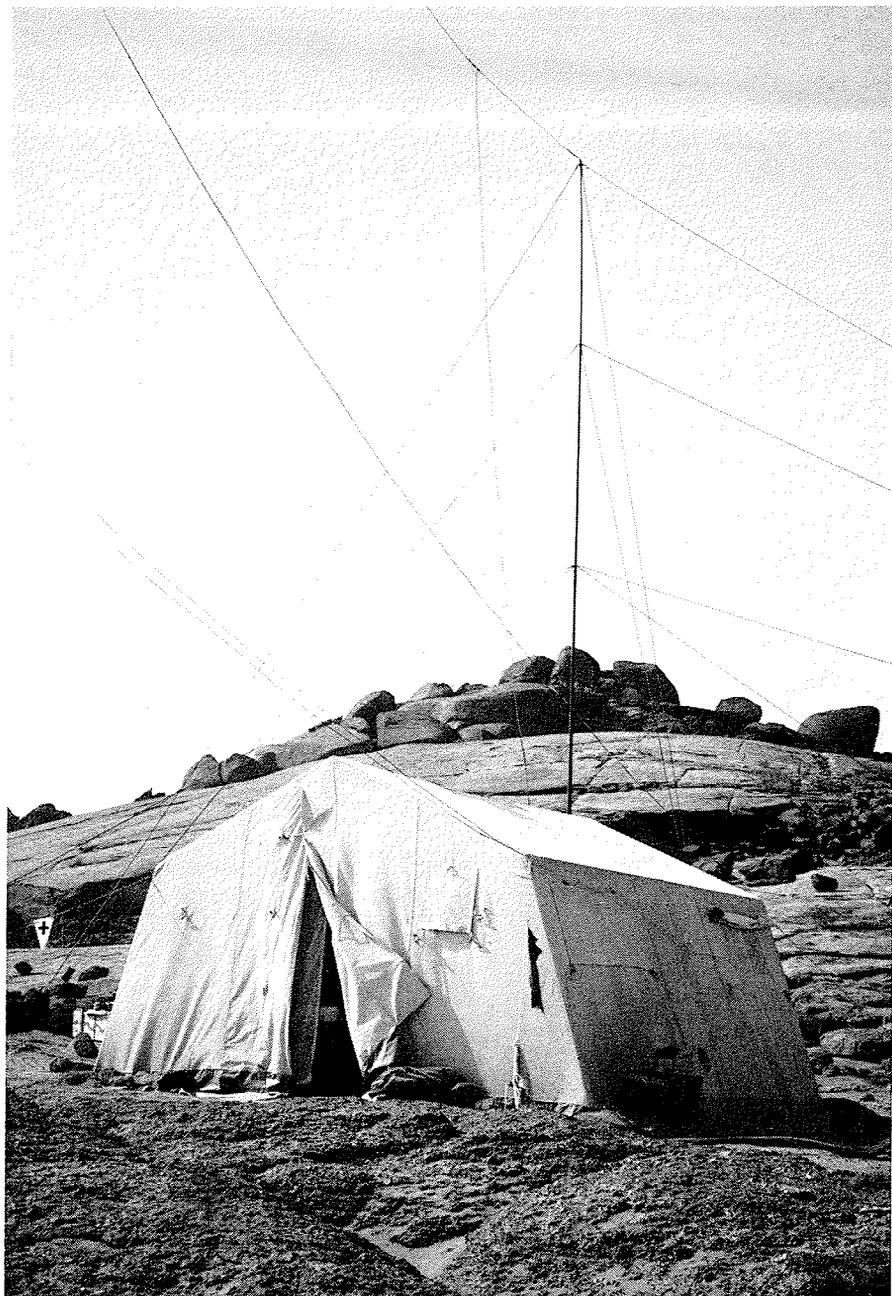
In July 1974, at the time of the events in Cyprus, the ICRC radio antenna was erected on the roof of the delegation's base within a few hours after the arrival of the first delegates. Although all other telecommunications had been interrupted, Geneva quickly received the first reports on the situation and launched its first appeals for assistance.

Radio communications have abundantly proved their worth in the most recent humanitarian undertakings.

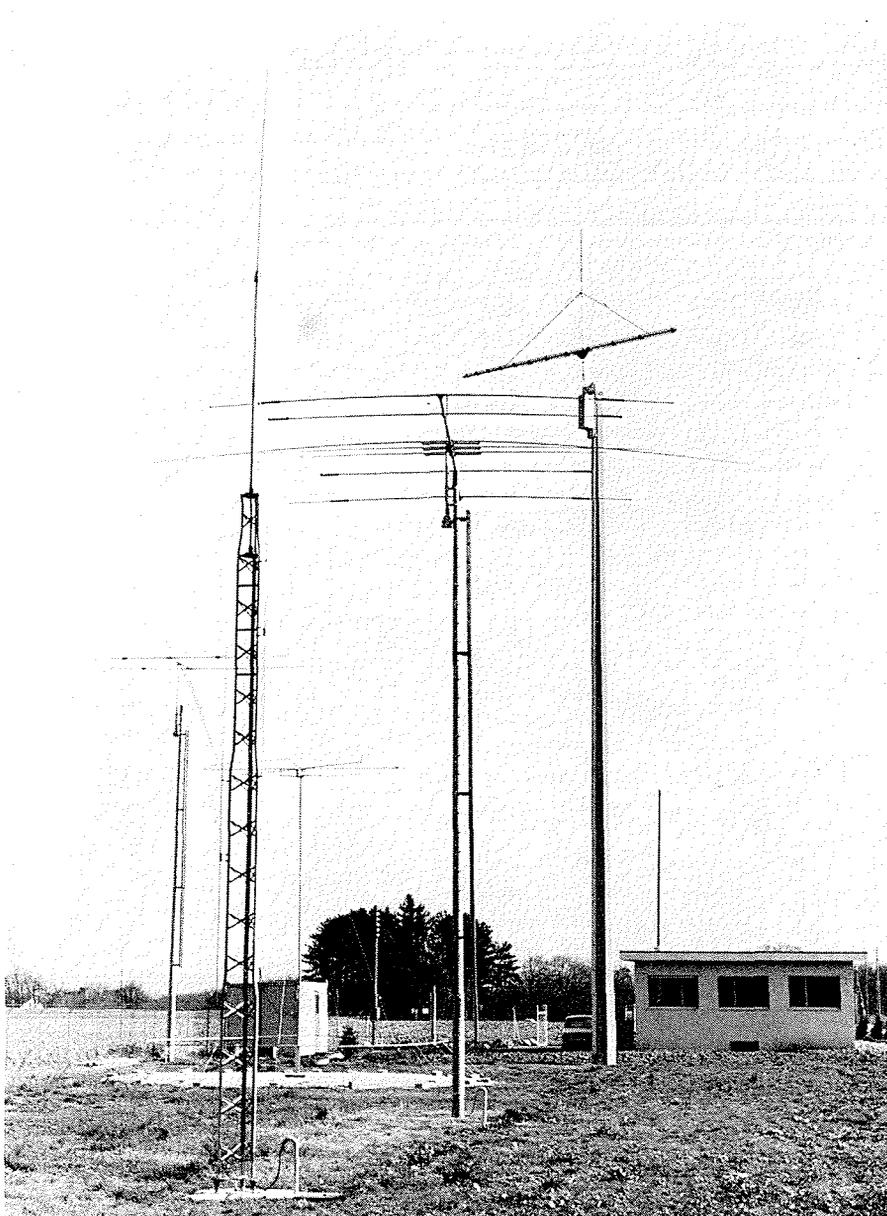
In 1975, considering only the ICRC, about fifteen communications were exchanged daily—mostly by radio telegraphy—with delegations in the Middle East (Amman, Cairo, Beirut), the Far East (Phnom Penh), the Asian subcontinent (Dacca), Africa (Lomé), Latin America (Caracas, Santiago) and Cyprus, not counting all the conversations by radio telephone between officials in Geneva and delegates in the field.

* * *

In co-operation with the League, the ICRC has also worked to develop radio communications throughout the Red Cross world as a whole. Since 1971, the two institutions have been urging National Societies to obtain permission from their governments to utilize Red Cross frequencies. Thirty-eight Societies, many of them in Latin America, are already doing so, and some of them are operating their own national networks.



1964: ICRC radio station in the desert at Uqhd (Yemen)...



... and ICRC transmitter-receiver **ten years later** at Versoix, near Geneva.

Photo J.-J. Kurz/CICR

The story of Red Cross radio communications cannot be complete without paying tribute to the role played by radio amateurs, who have often performed work of vital importance in humanitarian activities. We need only recall, for example, that in 1973, when the catastrophic earthquake ravaged Nicaragua and the radio system of the National Society was out of commission, it was a radio “ham” in direct touch with the Nicaraguan Red Cross who established the first contact between the League—through ICRC headquarters—and Managua. The League was then in a position to organize its relief activities, and the ICRC dispatched a radio operator and the necessary equipment to maintain the link between Managua and the League.

* * *

Telecommunications are tremendously important, as we can see, for the work of the ICRC. The communications infrastructure, little known to the general public, has become one of the indispensable means for co-ordinating all of the humanitarian activities of the Red Cross—which has been forced to adapt its operations to the rapidity of modern war techniques, to the ever-increasing destruction resulting from conflicts, and to the need to intervene with the utmost rapidity in the event of natural catastrophes. Most of the time, under such circumstances, such conventional means of communication as the telephone and telex are interrupted. This is why every emergency delegation sent out into a new field of operations by the ICRC takes with it complete radio equipment. In this way we can be sure that the voices of men and women working for the Red Cross, across all the seas and continents of the world, will summon aid for suffering people.

IN THE RED CROSS WORLD

WORLD RED CROSS CONFERENCE ON PEACE

A world conference will be held, from 11 to 13 June 1975 in Belgrade, organized jointly by the Yugoslav Red Cross and the League of Red Cross Societies. It will be attended by representatives of Red Cross, Red Crescent and Red Lion and Sun Societies to examine how the Red Cross movement may contribute to the promotion of peace and to consider the role it can assume as a factor for peace in the world.

Several National Societies, the two international Red Cross institutions, and the Henry Dunant Institute will submit reports on chosen themes. These reports, and shorter communications, will be read to the plenary meetings. They will not be analytical recapitulations, for what is wanted is a set of action programmes valid for our movement as a whole. The ICRC has provided the organizing committee with studies on the following subjects:

The alleviation of war victims' suffering as a Red Cross contribution to the promotion of peace;

Application and development of international humanitarian law as a Red Cross contribution to the promotion of peace:

- (a) Dissemination and reinforcement of the application of the Geneva Conventions;*
- (b) Information on the direction of current work for the reaffirmation and development of international humanitarian law.*

The interest of the Red Cross in the problem of peace is well known. Its very action is work for peace. This shows how important is a conference such as the one to be held in Belgrade, and the ICRC wishes it every success.

SEVENTH REGIONAL MEETING OF ARAB RED CRESCENT AND RED CROSS SOCIETIES

This regional conference took place in Riyadh from 27 to 31 January 1975. Organized by the Saudi Arabian Red Crescent and chaired by its President, Dr. Abdul Aziz Al-Mudarres, it brought together delegates from the National Societies of Algeria, Bahrain, Egypt, Iraq, Jordan, Kuwait, Lebanon, Libya, Mauritania, Morocco, Saudi Arabia, Somalia, Southern Yemen, Sudan, Syria and Tunisia. Delegates of the "Palestinian Red Crescent" and of the Ministry of Health of the Arab Emirates took part in the meeting. The League was represented by its Secretary-General, Mr. H. Beer, accompanied by several League staff members. Also present, on behalf of the Study for the Re-appraisal of the Role of the Red Cross, was Mr. Warras and, for the ICRC, Mr. Gailard and Mr. Hocké, Directors, and Mr. Convers, a delegate.

The conference was opened by the Minister of Labour and Social Affairs of Saudi Arabia, excerpts from whose speech are presented below:

The whole world is paying tribute and respect and full support to the great Red Crescent—Red Cross humanitarian mission based on such fundamental principles of humanity, friendship and unity, rendering impartial assistance when and wherever needed indiscriminately.

Our world of today with all sorts of calamities and dangers threatening mankind is putting all hopes and wishes on this unique humanitarian institution, more than ever before, to alleviate and relieve man's distress during war and peace times and to promote peace.

The Red Cross and Red Crescent movement born on the battle field with the desire to give care and treatment to the victims of conflicts has expanded, as we see today, to cover all humanitarian fields during war and peace times alike, and distinguished itself as the hopeful resort for all victims.

When supporting and standing by this humanitarian movement we are matching ourselves with the supreme pioneer principles and teachings of the great Islam from where all our acts and moves are derived and inspired. We are dictated by our religion to be humane and to dedicate ourselves to

the humanitarian work and peace and all our national and international commitments and initiatives are based on these ideals and principles.

Among the questions on the agenda were the following: an Arab institute for the training of volunteers; the establishment of a permanent secretariat for the Arab National Societies; the Second Session of the Diplomatic Conference in Geneva; the creation of new National Societies in the States of the Arab Gulf; the independence of National Societies; activities and proposals by the Henry Dunant Institute. Discussions also dealt with the activities of the ICRC in the Middle East, in the course of which Mr. Hocké had occasion to recall the bases of ICRC action in the occupied territories and to draw attention to the fact that the ICRC, even more than in the past, relies upon the support of the Arab Governments and National Societies.

The participants also considered problems relating to the diffusion of the Geneva Conventions. Mr. Gaillard described the activities of the ICRC in this connection, through translations and publications. A resolution was adopted by the conference, urging Governments and National Societies to intensify their activities in this field. The following is the text of the resolution:

The Seventh Conference of Arab National Societies, conscious of the need to continue and develop efforts for the diffusion of the Geneva Conventions,

asks all Arab National Societies to intervene with their respective Governments to assure that practical and effective measures are taken to:

teach systematically the essential provisions of the Geneva Conventions in the armed forces, down to the level of the ordinary soldier; in addition, to teach fundamental humanitarian principles to young people, particularly in the secondary schools;

also asks the National Societies to train personnel capable of teaching the Geneva Conventions;

requests the ICRC to continue its activities in this field by supporting, as necessary, the efforts of National Societies.

The participants agreed, finally, to hold the next Regional Conference at Damascus in 1976. The Conference will be organized by the Syrian Red Crescent.

SWEDISH RED CROSS CONFERENCE

Twenty-two district secretaries who have key roles in the regional management of the Swedish Red Cross held their annual conference in Geneva at the Henry Dunant Institute from 3 to 7 February 1975. The conference consisted in a seminar programme organized by eight officers of the Society's national headquarters, with the co-operation of members of the International Red Cross institutions.

The participants studied the structure, aims and activities of the International Red Cross in order to develop their skills in providing information and helping the public to understand the principles of the Red Cross and its work. They also examined the practical problems involved in providing protection and assistance to victims of man-made and natural disasters. The Red Cross development programme was also the subject of a series of group exercises.

Special attention was devoted to the improvement of communications between the National Society and the International Red Cross institutions in Geneva.

HENRY DUNANT INSTITUTE ¹

It will be recalled that *International Review* published in its August 1974 issue an article on Henry Dunant which had been written by Pierre Boissier only a short time before his death. The Henry Dunant Institute, of which Pierre Boissier was director, has now issued this study in a 24-page booklet available from the Institute in four languages: English, French, German and Spanish.

A year has now gone by since the Institute was set up in its new premises. The move was made possible through the generosity of the City of Geneva and the Swiss Confederation. The building now housing the Institute contains offices, large assembly rooms, a library and a museum which is open to the public and where documents and other items relating to Dunant and to Red Cross work throughout the world are displayed.

¹ Address: Institut Henry-Dunant, 114 rue de Lausanne, 1202 Geneva. Price of booklet: Sw.fr. 2.00.

M I S C E L L A N E O U S

THE UNITED STATES BECOMES A PARTY TO THE GENEVA PROTOCOL

The Geneva Protocol was concluded on 17 June 1925 under the auspices of the League of Nations, and its depositary is the Government of the French Republic. The Protocol prohibits the use in war of asphyxiating, poisonous or other gases and of bacteriological methods of warfare.

Several International Conferences of the Red Cross had adopted resolutions appealing to the Governments of States which had not done so to accede to the 1925 Geneva Protocol, and the ICRC continued to devote great attention to this question. Following approaches made by the ICRC in 1966 to eighty Governments which were not bound at the time by the Protocol, a large number of them signified their ratification of this agreement. It is therefore gratifying to learn that the instruments of ratification of this Protocol were signed on 22 January 1975 by the President of the United States of America.

ALBERT SCHWEITZER AND HUMANITARIAN THOUGHT AND ACTION

This year being the centenary of the birth of Albert Schweitzer, *International Review* deems the occasion appropriate for a fresh tribute to a man whose life and work displayed such singleness of purpose.¹ With him, action closely followed thought, and thought always retained some-

¹ See *Revue internationale*, March 1955, July 1961, and *International Review*, October 1965.

thing born of experience conferring upon it exceptional weight, like the quality of self-evidence.

In 1905, Schweitzer was the incumbent of a Chair of Theology at the University of Strasbourg besides being an organist of recognized talent, when he decided to serve mankind in a more direct manner: he started along the road which led him into "the virgin forest". He gives a full picture of himself in his writings to explain his decision. "I wanted to become a doctor so as to work without speaking. For years I was unsparing of words. I enjoyed my work as a teacher of theology and as a preacher. Yet this new work would consist not in speaking of the religion of love, but in putting it into practice." So, at thirty years of age, he began to study medicine. On completing his studies, he left for Africa and devoted his energy to the sick who converged on the hospital he founded at Lambaréné.

He was also a thinker and meditated on the great problems of the contemporary world. Peace captured his attention in his later years, and a book has recently been published ¹ about which Mr. J.-H. Rombach—several of whose articles we have already published—wrote the following:

It seems appropriate to draw attention this year to a book which brings to light an affinity between the thought of Dr. Schweitzer and the spirit underlying the Red Cross movement. Other publications about the doctor of Lambaréné are expected to be issued on this occasion, but this one is of special interest to those who are at present actively concerned with the improvement of international humanitarian law.

Dr. Winnubst's thesis, presented at the Faculty of Law at Groningen University, expounds the evolution of Schweitzer's thought on peace and on the menace hanging over the world's very existence through the development of atomic weapons. It was typical of Schweitzer that, before speaking out to the world, he studied the problem which caused him such grave concern from many angles and in great depth. An analysis of the books and texts on which he meditated in that period sheds light on the way his thought was taking shape. Towards the end of 1957, his writings and discourses contained increasingly pressing warnings of the immense dangers of nuclear weapons. His first objective was to obtain the discontinuance of nuclear experiments, and he was well aware of the force of public opinion in this as well as in other matters. In the numerous articles he wrote and from an examination of the exhaustive list of his publications on this subject during the next few years, we can follow his unremitting campaign for peace. The

¹ Benedict Winnubst, *Das Friedensdenken Albert Schweitzer*, Editions Rodopi, Amsterdam 1975.

bibliography in this book is a valuable source for the study of peace and of humanitarian means to defend its cause.

It was inevitable that Albert Schweitzer, with such a universal mind as his, should take an interest in the Red Cross and its work. In 1953, he broadcast a message to the ICRC on the occasion of the 125th anniversary of the birth of Henry Dunant. In his address he affirmed with great conviction what the idea and work of the Red Cross meant to him, and we believe it to be opportune today to quote here its conclusion. In its turn, the Red Cross extends its gratitude to a man who fought with all his strength to alleviate the sufferings of human beings:

“...The Red Cross is a much greater and more powerful body than its founder would ever have dared to imagine. But it represents something more; in our sombre world in the aftermath of war, it stands for a truth, which is that every human being is called upon to feel, think and act with the compassion and dedication inherent in his nature, and that nations, which are associations of human beings, have to behave in the same way.

We are reminded by the Red Cross of this ideal, of which we are well aware but to which we are only moderately loyal. It is taught by the Red Cross to people who know it not as yet, and it emboldens us to hope for a world other than the one we live in. We are profoundly grateful to the man who lit this beacon, shining in the darkness around us. It is up to us now to watch over it and keep it alight.”

INTERNATIONAL WOMEN'S YEAR

The United Nations General Assembly has proclaimed the year 1975 as International Women's Year, in the course of which intensive action is to be undertaken:

- (a) To promote equality between men and women.
- (b) To ensure the full integration of women in the total development effort, especially by emphasizing women's responsibility and important role in economic, social and cultural development at the national, regional and international levels.
- (c) To recognize the importance of women's increasing contribution to the development of friendly relations and co-operation among States and to the strengthening of world peace.

Upon receiving a declaration signed by 35 heads of State, maintaining that economic and social progress requires the full participation of women alongside men in all fields, United Nations Secretary-General Kurt Waldheim made the following statement:

“Since the inception of the United Nations, the Organization has been fully committed to the principle of equality between women and men, a principle which was established in the Charter of the United Nations in 1945 and in the Universal Declaration of Human Rights in 1948. But we must frankly admit that the gulf between formal acceptance of this principle and implementation in practice has been and still is very wide.

In short, despite the advances of the past 30 years, discrimination against women remains a pervasive fact of life in many countries and thus represents a major obstacle to real social, economic and political progress in the world.

We are talking, after all, about half of the population of this planet. We are talking about a vast human asset which, in general, has not been given either the recognition and respect or the opportunities to contribute to the realization of an equitable world order and to the solution of pressing international problems which confront us today.

International Women's Year 1975 gives the international community a unique opportunity to promote genuine equality between women and men, not only in law but in everyday life; to ensure the full involvement of women in the development effort, and in the sharing of its benefits; and to greatly increase the contribution of women to the achievement of the fundamental aims and objectives of the United Nations—namely, the maintenance of peace, and the improvement of conditions of life for all.

We have it in our power to make this Year a truly valuable and important advance in the position of women in the social, economic, cultural and political process; or, alternatively, merely to make it a ceremonial occasion devoid of practical meaning.

We in the United Nations are determined to do all in our power to make International Women's Year of real significance. In this task we ask for and need the active assistance of all citizens. International Women's Year is not an occasion for women alone. It can be and should be an occasion for the united efforts of us all—men and women—to ensure that fundamental human rights and responsibilities are shared by all humanity. This Year should leave an imprint on history, not only on the history of women's advancement but also on that of people all over the world."

The Red Cross, which fights against all discrimination, supports the efforts undertaken for the defence of women, both in time of war and in time of peace, and thus supports activities throughout the world in connection with International Women's Year. Our Review will return to this subject with the forthcoming publication of an article dealing with the status of women and children in the law of armed conflict. Other organizations are also fighting for the same cause, for example the International Council of Nurses (ICN), whose Executive Director, Miss Adele Herwitz, wrote: ¹

"The status of women is not only a social issue; it is a nursing issue too. This question is closely linked to the status of the nursing profession.

International Nurses Day 1975, celebrated in most countries on May 12, the anniversary of the birth of Florence Nightingale, will focus on the theme International Women's Year.

¹ International Nursing Review. Vol. 22, No. 1, Issue 199, Jan.-Feb. 1975.

There are exceptions, of course, but in most countries the nursing profession is largely female. Another reason for nurse involvement in the issues which will receive attention in 1975 is the recognition by nurses of their responsibility as citizens for supporting action to meet both health and social needs of the public. The question of women's role in modern society comes into ICN's position on human rights in general.

Many of the nursing profession's continuing problems are a reflection of the role traditionally accorded to women. This has affected, for example, the salary levels in nursing and has made it difficult to achieve recognition of the need for university education for nurses and the need for nurse participation in policy- and decision-making in health matters.

The action which will be taken will vary according to the particular social conditions of each country. ICN'S focus will be the promotion of equality in every respect between men and women, as this affects the nursing profession and as this affects the nursing and health care available to all members of society."

MIGRANTS' CHILDREN

Under this title, the International Child Welfare Review¹ carries an article by Miss Ingrid Gelinek, Secretary General of the International Social Service. We believe that the publication in International Review of the Red Cross is of interest to our readers as the problem of aid to migrants is being attentively followed by the Red Cross, various international bodies and certain National Societies, which provide invaluable assistance, particularly in cases involving the reuniting of families and the provision of legal aid. It will be recalled, moreover, that the late Miss Suzanne Ferrière was at one time a member of the ICRC while still filling the post of Secretary General of the International Social Service, thus showing how closely connected are the fields of concern of both these non-governmental organizations which have each a part to play in finding solutions to the distressing problem of migrants.

... Certain basic factors must be considered in studying the problems of children : Was the decision to migrate made voluntarily or were there pressures of some kind which forced the individual or the family concerned to move? From what type of community did the family move and what is the attitude of the community to migration? The answers to these questions have considerable influence on the attitudes and behaviour patterns of parents who migrate and an important effect on the intellectual, emotional and physical development of children of migrant workers. Also related to the motivation of workers to migrate is the question of adequate preparation. Had it been possible to obtain personal and legal counselling before the move was made? Was language and professional training offered so as to facilitate later adaptation?

¹ Geneva, May 1974, No. 21.

Were the children involved in the process of emigration? And, given their age, were they able to understand the plans of their parents? This preparatory phase is of the utmost importance, but help, assistance and counselling after the arrival of the migrant worker in the host country is equally necessary. Countries, national policies, attitudes and conceptions differ widely in relation both to the sending abroad of workers and to their reception in the foreign country. These basic policy issues, however, affect the position, adaptation and integration process of the migrant worker and his family and, hence, affect the children.

Let us first take a look at the problems of children who move with the family group to a foreign country. Although there are of course variations according to age, number of siblings, stability of family unit, etc., one can distinguish certain common problem areas.

Housing: Housing facilities for migrant workers are frequently inadequate and not geared to the needs of children. Children are confronted with lack of space, unfamiliar surroundings and equipment, insufficient play areas, unhealthy conditions. If the parents economize so as to maintain a second household in their home country, this economic burden forces them to accept the cheapest possible housing facilities. If, in addition (and this is frequently the case), the move was from a rural community to an urban community, the child is deprived of necessary freedom, the security of moving around in familiar surroundings, the stimulation of a great variety of experiences, etc.

Food: Usually a child becomes accustomed to food patterns geared to his needs and based on community patterns. The adjustment to different food, the frustration felt by the mother at not being able to provide the child with the usual food, or her desperate efforts to cope with this problem very often pose serious problems for children, and bad eating habits with consequent emotional and health problems occur.

Climate: Changes of climate can also involve dangerous problems for the child. Very often these are complicated by the lack of

MISCELLANEOUS

proper clothing which, on the one hand, endangers the health of the child, and, on the other, makes the child look different from other children. For a certain age group, this is a serious personal problem.

Language: In the family group the language of the home country is spoken, but when the child wishes to communicate with the outside world, he is faced with the inability to express himself properly. Frustration and a feeling of inferiority result, frequently causing children to withdraw from experiences in the "outside world" and refrain from establishing emotional relationships in that world. Others, however, react aggressively and in an uncontrolled manner under this pressure, which in turn leads to a rejection, from which they suffer. Some children pick up foreign languages quickly, and if this is not the case with the parents, they become the "interpreters". This again is a situation which will pose problems for the children, since it has effects on the relationship among the members of the family.

School and friends: The language problem on the one hand, the status as a foreigner, the physical, social and emotional environment in which the child lives and his personal adaptation capacities on the other, strongly influence the performance of the child in a group of children. Children very frequently suffer from "being different", and their reactions to this situation spark off a whole process of interactions with other children. These interactions need to be positive and constructive to allow intellectual and emotional growth of the child, and the children of migrant workers are often at a disadvantage in this respect.

Parents' time: Very often, the new rhythm of work of the father is unfamiliar to the children ; his work and his new life preoccupy him and he finds less time and/or has less energy to foster his relationship with his children. In addition, the mother may also have to work, for economic reasons or in an attempt to adjust to the social and cultural environment of the host country. In other words, children are very often confronted suddenly with what appears to them as a lack of parental attention and love, and they

interpret this situation as neglect. They are left to themselves or placed in institutions or day-care centres. This experience may lead to very serious emotional disturbances, which in turn affect the relationships in the family group.

This list of factors influencing the development of the children of migrant workers and the difficulties they may have to face could be prolonged. The reactions of a small child to pressure are different from the school child's or the child in puberty and the problems will vary widely. If one takes into account, furthermore, the fact that large groups of migrant workers often live in kinds of "ghettos" (usually in an effort to preserve their cultural and social traditions and to obtain support and security from relationships with their compatriots), that misconceptions about foreigners, misunderstanding about different cultural and social patterns exist in large parts of the indigenous population, and that every child needs a stable, secure and supporting environment to allow its emotional, physical and intellectual growth, the complexity of the situation becomes clear...

NURSING IN A CHANGING WORLD

An article by Mr. V. A. Christensen, was published under this title by the Regional Office for Europe of WHO in September last. We believe our readers will find the following excerpts to be of interest.

The years that have elapsed since the end of the Second World War and the creation of the World Health Organization have been characterized by an enormous growth in medical and health services throughout the world. Countries that had formerly been thought of as amply endowed with physicians, nurses, and schools of medicine and nursing have consequently been faced with the problem of lack of trained personnel needed for expansion and for the vast changes in professional approaches.

The role of WHO in this climate of change has largely been to arrange meetings of interdisciplinary groups of persons who are knowledgeable about, and concerned with, the role of nursing, and of midwifery as well. A Symposium on Higher Education in Nursing, held at The Hague in October 1972, is but one example of this type of meeting. Here participants from 21 countries of the European Region of WHO stressed the need to view nursing and nurses in their relationship to the total system of health care. Nursing care in most countries is delivered by a variety of workers who provide services ranging from simple, repetitive manual skills to services involving a high level of judgement in applying scientific principles and in choosing the appropriate action to be taken.

Universities open their doors to nurses

In several countries in the WHO European Region universities have opened their doors to nurses, and university programmes in nursing education have now been established in Belgium, France, Poland, Turkey, the United Kingdom, and lately in Iceland. The rich resources of a university are of unique value in preparing the student nurse for the level and scope of nursing demanded in modern health care, and for a future career that requires flexibility and a capacity to adapt to change and to

the unknown. Educating nurses and doctors together can prepare them from their student days for their complementary roles in health care.

Degrees as Masters of Nursing or Bachelors of Nursing can now be taken at a few universities in Europe, amongst them Lublin and Manchester. The Manchester degree of Bachelor of Nursing was instituted in 1969, the unit responsible being the Department of Nursing within the Faculty of Medicine... In some States within the United States, nurses can study at medical schools, and can within certain fields diagnose and give treatment.

Entry to the nursing profession by a degree course is unfortunately still exceptional, but need not remain so. The Manchester course extends over four academic years of full-time study. It is designed to give almost equal weight to the theoretical studies of the sciences underlying nursing and to vocational training in the practice of nursing. It enables nursing students to enjoy an educational experience comparable with that of colleagues in medicine, social work and health administration.

The efforts to make hospital care more efficient and less gloomy are certainly praiseworthy. But one could take a more revolutionary step and ask whether the many new, huge and highly sophisticated hospitals are really necessary. One could also ask whether many of their patients could not quite adequately, often more efficiently and pleasantly, and certainly at a much smaller cost, be taken care of in comfortable nursing homes, or indeed in their own homes?

An almost alarming number of people who are not in need of intensive care are admitted to hospital simply for lack of suitable accommodation elsewhere, or of sufficient professional home-care services. Reserving hospital beds for people who really had to be there would call for a soul-searching re-evaluation of what constitutes a patient's real needs.

Nursing homes, ideally ones situated close to a hospital, could provide the day-to-day care and the relaxed atmosphere which most patients require. Where family circumstances permit, a well-organized, well-developed service of home nurses could provide care in surroundings which are the patient's own, and dear to him.

In the many discussions on the future of nursing, considerations such as these should, in my opinion, be given a prominent place.

BOOKS AND REVIEWS

The effect on man of deterioration of the environment, *WHO Chronicle*, Geneva, December 1974.

The health and wellbeing of a population depend both on its degree of socio-economic development and on the complex of physical, chemical, biological and social factors that make up its environment.

It has become clear in recent years that environmental degradation, if allowed to proceed unchecked, could result in serious and even irreversible damage to life on this planet. Poor sanitary conditions and the accompanying communicable diseases are the most important causes of morbidity and mortality in the developing countries, where the majority of the world's population live.

These problems have been largely eliminated in the economically more advanced countries, where other environmental hazards have developed that affect health in a more insidious and complex way than do communicable diseases. These hazards, which are beginning to take their toll in developing countries too, include the physical and chemical factors and psychosocial influences which, together with microbiological agents, make up that part of the ecosystem most directly affecting man's health.

It is of crucial importance to define and specify the adverse effects of the environment. Unfortunately, a precise definition of many of these effects is not yet possible, owing partly to the complexity of the interactions between environmental factors and health and partly to lack of knowledge about many of the factors involved and about the part played by economic, political, and cultural components.

Moreover, man is himself a highly complex organism and tends, when faced with fluctuations in the external environment, to maintain the balance of his internal environment within narrow limits. His homeostatic regulatory functions are closely integrated, and linked with the metabolic processes and the defence and clearance mechanisms that enable him to cope to some extent with adverse changes in his surroundings. Thus, when faced with any challenge from the external environment, man's reaction is rarely direct and simple, and this is one of the main reasons why it is so difficult to obtain precise knowledge of the effects of the environment on health. Two extremely important characteristics are involved, namely adaptability and variability. Adaptability is a property of living things that enables them to attain a new state of equilibrium in a new situation; in man, it is dependent on the very wide variability of his biological, physiological, and mental characteristics. Such variability is encountered in the individual as well as within the different human groupings and makes it extremely difficult to elaborate universally applicable standards in the sphere of environment and health.

Finally, in man psychosocial and cultural factors play a preponderant role.

Assessments of the adverse effects of environmental deterioration will differ according to whether one considers the individual or the population and according to the categories of population concerned. The task of defining health indicators finer than mortality, morbidity, or fertility has only just begun to be tackled. It is probably within the especially vulnerable groups (such as children, elderly persons, and the functionally or mentally handicapped) that sensitive indicators will have to be sought.

A dual methodological approach is needed consisting of the epidemiological method, whereby observable facts are studied in human populations under normal conditions of exposure, and the toxicological method, which involves studies and experiments on man and on animals (with all the uncertainties of extrapolation that this implies) and in which the conditions of exposure are controlled. These two approaches are complementary, but when they lead to divergent conclusions the epidemiological findings must be given the greater weight. . .

... Whereas in the industrialized countries the factors having a direct or indirect effect on health are mainly those introduced by development, in the developing countries the leading role in this respect is played by factors in the natural environment. Among these factors, water is of particular importance. Much of the world's population lacks not only water supplies that are adequate in quality and quantity but also sufficiently hygienic means of waste disposal.

The endemic diseases of the past still persist and are, in fact, sometimes spread by large irrigation schemes. It is estimated that schistosomiasis affects about 200 million individuals and that, in some areas, the prevalence exceeds 50%. There are also tens of thousands of cases of ankylostomiasis, strongyloidiasis, and filarial diseases. As for malaria, despite considerable efforts over the years, hundreds of millions of people are still at high risk of the disease and, in one country where eradication had apparently been achieved, there have been some 2 million new cases since 1970.

Stock-breeding and agriculture are also affected by the unfavourable ecological conditions, and a vicious circle is started. Economic growth is hampered when large sectors of the population suffer from malnutrition and disease, while industrialization introduces problems of urbanization and population density that are unfavourable to social development.

In the most industrialized as in the least favoured countries, environment and population are closely linked and interact—sometimes positively, sometimes negatively. The problems created can clearly be solved only through a global approach.

It is to be hoped that scientific progress will make it possible to reduce morbidity and prolong life. However, efforts to improve health must, in future, involve greater efforts to protect the essential biological ecosystems and prevent further degradation of the environment. Greater attention must also be paid to psychosocial factors, so that human life is not only prolonged and disease controlled but life is also happier and more harmonious.

EXTRACT FROM THE STATUTES OF
THE INTERNATIONAL COMMITTEE OF THE RED CROSS

ADOPTED 21 JUNE 1973

ART. 1. — *International Committee of the Red Cross*

1. The International Committee of the Red Cross (ICRC), founded in Geneva in 1863 and formally recognized in the Geneva Conventions and by International Conferences of the Red Cross, shall be an independent organization having its own Statutes.

2. It shall be a constituent part of the International Red Cross.¹

ART. 2. — *Legal Status*

As an association governed by Articles 60 and following of the Swiss Civil Code, the ICRC shall have legal personality.

ART. 3. — *Headquarters and Emblem*

The headquarters of the ICRC shall be in Geneva.

Its emblem shall be a red cross on a white ground. Its motto shall be *Inter arma caritas*.

ART. 4. — *Role*

1. The special role of the ICRC shall be :

- (a) to maintain the fundamental principles of the Red Cross as proclaimed by the XXth International Conference of the Red Cross ;
- (b) to recognize any newly established or reconstituted National Red Cross Society which fulfils the conditions for recognition in force, and to notify other National Societies of such recognition ;
- (c) to undertake the tasks incumbent on it under the Geneva Conventions, to work for the faithful application of these Conventions and to take cognizance of any complaints regarding alleged breaches of the humanitarian Conventions ;

¹ The International Red Cross comprises the National Red Cross Societies, the International Committee of the Red Cross and the League of Red Cross Societies. The term " National Red Cross Societies " includes the Red Crescent Societies and the Red Lion and Sun Society.

- (d) to take action in its capacity as a neutral institution, especially in case of war, civil war or internal strife ; to endeavour to ensure at all times that the military and civilian victims of such conflicts and of their direct results receive protection and assistance, and to serve, in humanitarian matters, as an intermediary between the parties ;
- (e) to ensure the operation of the Central Information Agencies provided for in the Geneva Conventions ;
- (f) to contribute, in view of such conflicts, to the preparation and development of medical personnel and medical equipment, in co-operation with the Red Cross organizations, the medical services of the armed forces, and other competent authorities ;
- (g) to work for the continual improvement of humanitarian international law and for the better understanding and diffusion of the Geneva Conventions and to prepare for their possible extension ;
- (h) to accept the mandates entrusted to it by the International Conferences of the Red Cross.

2. The ICRC may also take any humanitarian initiative which comes within its role as a specifically neutral and independent institution and consider any question requiring examination by such an institution.

ART. 6 (first paragraph). — *Membership of the ICRC*

The ICRC shall co-opt its members from among Swiss citizens. It shall comprise fifteen to twenty-five members.

FOUR RECENT ICRC PUBLICATIONS
ISSUED FOR THE DIPLOMATIC
CONFERENCE
ON THE REAFFIRMATION AND
DEVELOPMENT OF INTERNATIONAL
HUMANITARIAN LAW
APPLICABLE IN ARMED CONFLICTS

	Sw. Fr.
Draft Additional Protocols to the Geneva Conventions of August 12, 1949, Geneva, 1973; 8vo, 46 pp.	10.—
Draft Additional Protocols to the Geneva Conventions of August 12, 1949, Commentary, Geneva, 1973; 8vo, 176 pp. . .	20.—
Weapons that may cause Unnecessary Suffering or have Indiscriminate Effects, Report on the Work of Experts, Geneva, 1973, 72 pp.	12.—
Conference of Government Experts on the Use of Certain Conventional Weapons, Geneva, 1975, 106 pp.	15.—



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- AFGHANISTAN — Afghan Red Crescent, Puli Artan, *Kabul*.
- ALBANIA — Albanian Red Cross, 35, Rruga e Barrikadavet, *Tirana*.
- ALGERIA — Algerian Red Crescent Society, 15 bis, Boulevard Mohamed V, *Algiers*.
- ARGENTINA — Argentine Red Cross, H. Yrigoyen 2068, *Buenos Aires*.
- AUSTRALIA — Australian Red Cross, 122-128 Flinders Street, *Melbourne 3000*.
- AUSTRIA — Austrian Red Cross, 3 Gusshausstrasse, Postfach 39, *Vienna 4*.
- BAHRAIN — Bahrain Red Crescent Society, P.O. Box 882, *Manama*.
- BANGLADESH — Bangladesh Red Cross Society, Amin Court Building, Motijheel Commercial Area, *Dacca 2*.
- BELGIUM — Belgian Red Cross, 98 Chaussée de Vleurgat, *1050 Brussels*.
- BOLIVIA — Bolivian Red Cross, Avenida Simón Bolívar, 1515, *La Paz*.
- BOTSWANA — Botswana Red Cross Society, Independence Avenue, P.O. Box 485, *Gaborone*.
- BRAZIL — Brazilian Red Cross, Praça Cruz Vermelha 10-12, *Rio de Janeiro*.
- BULGARIA — Bulgarian Red Cross, 1, Boul. Biruzov, *Sofia 27*.
- BURMA (Socialist Republic of the Union of) — Burma Red Cross, 42 Strand Road, Red Cross Building, *Rangoon*.
- BURUNDI — Red Cross Society of Burundi, rue du Marché 3, P.O. Box 324 *Bujumbura*.
- CAMEROON — Cameroon Red Cross Society, rue Henry-Dunant, P.O.B. 631, *Yaoundé*.
- CANADA — Canadian Red Cross, 95 Wellesley Street East, *Toronto, Ontario, M4Y 1H6*.
- CENTRAL AFRICAN REPUBLIC — Central African Red Cross, B.P. 1428, *Bangui*.
- CHILE — Chilean Red Cross, Avenida Santa María 0150, Correo 21, Casilla 246V., *Santiago de Chile*.
- CHINA — Red Cross Society of China, 22 Kanmien Hutung, *Peking, E*.
- COLOMBIA — Colombian Red Cross, Carrera 7a, 34-65, Apartado nacional 1110, *Bogotá D.E*.
- COSTA RICA — Costa Rican Red Cross, Calle 5a, Apartado 1025, *San José*.
- CUBA — Cuban Red Cross, Calle 23 201 esq. N. Vedado, *Havana*.
- CZECHOSLOVAKIA — Czechoslovak Red Cross, Thunovska 18, *Prague 1*.
- DAHOMÉY — Dahomean Red Cross P.O. Box 1, *Porto Novo*.
- DENMARK — Danish Red Cross, Ny Vestergade 17, DK-1471 *Copenhagen K*.
- DOMINICAN REPUBLIC — Dominican Red Cross, Apartado Postal 1293, *Santo Domingo*.
- ECUADOR — Ecuadorian Red Cross, Calle de la Cruz Roja y Avenida Colombia, 118, *Quito*.
- EGYPT (Arab Republic of) — Egyptian Red Crescent Society, 34 rue Ramses, *Cairo*.
- EL SALVADOR — El Salvador Red Cross, 3a Avenida Norte y 3a Calle Poniente, *San Salvador, C.A.*
- ETHIOPIA — Ethiopian Red Cross, Red Cross Road No. 1, P.O. Box 195, *Addis Ababa*.
- FJI — Fiji Red Cross Society, 193 Rodwell Road, P.O. Box 569, *Suva*
- FINLAND — Finnish Red Cross, Tehtaankatu 1 A Box 168, *00141 Helsinki 14*.
- FRANCE — French Red Cross, 17, rue Quentin Bauchart, F-75384 *Paris*, CEDEX 08.
- GAMBIA — The Gambia Red Cross Society P.O. Box 472, *Banjul*.
- GERMAN DEMOCRATIC REPUBLIC — German Red Cross of the German Democratic Republic, Kaitzerstrasse 2, DDR 801 *Dresden 1*.
- GERMANY, FEDERAL REPUBLIC OF — German Red Cross in the Federal Republic of Germany, Friedrich-Ebert-Allee 71, 5300, *Bonn 1*, Postfach (D.B.R.).
- GHANA — Ghana Red Cross, National Headquarters, Ministries Annex A3, P.O. Box 835, *Accra*.
- GREECE — Hellenic Red Cross, rue Lycavittou 1, *Athens 135*.
- GUATEMALA — Guatemalan Red Cross, 3ª Calle 8-40, Zona 1, *Ciudad de Guatemala*.
- GUYANA — Guyana Red Cross, P.O. Box 351, Eve Leary, *Georgetown*.
- HAITI — Haiti Red Cross, Place des Nations Unies, B.P. 1337, *Port-au-Prince*.
- HONDURAS — Honduran Red Cross, 1ª Avenida entre 3a y 4a Calles, N° 313 *Comayagüela*, D.C.
- HUNGARY — Hungarian Red Cross, V. Arany János utca 31, *Budapest V*. Mail Add.: *1367 Budapest 5*, Pf. 249.
- ICELAND — Icelandic Red Cross, Øldugøtu 4, Post Box 872, *Reykjavik*.
- INDIA — Indian Red Cross, 1 Red Cross Road, *New Delhi 110001*.
- INDONESIA — Indonesian Red Cross, Djalan Abdul Muis 66, P.O. Box 2009, *Djakarta*.
- IRAN — Iranian Red Lion and Sun Society, Av. Villa, Carrefour Takhté Djamchid, *Teheran*.
- IRAQ — Iraqi Red Crescent, Al-Mansour, *Baghdad*.
- IRELAND — Irish Red Cross, 16 Merrion Square, *Dublin 2*.
- ITALY — Italian Red Cross, 12 via Toscana, *Rome*.
- IVORY COAST — Ivory Coast Red Cross Society, B.P. 1244, *Abidjan*.
- JAMAICA — Jamaica Red Cross Society, 76 Arnold Road, *Kingston 5*.
- JAPAN — Japanese Red Cross, 29-12 Shiba 5-chome, Minato-Ku, *Tokyo 108*.
- JORDAN — Jordan National Red Crescent Society, P.O. Box 10 001, *Amman*.
- KENYA — Kenya Red Cross Society, St. John's Gate, P.O. Box 40712, *Nairobi*.
- KHMER REPUBLIC — Khmer Red Cross, 17 Vithei Croix-Rouge khmère, P.O.B. 94, *Phnom Penh*.
- KOREA, DEMOCRATIC PEOPLE'S REPUBLIC OF — Red Cross Society of the Democratic People's Republic of Korea, *Pyongyang*.
- KOREA, REPUBLIC OF — The Republic of Korea National Red Cross, 32-3Ka Nam San-Dong, *Seoul*.
- KUWAIT — Kuwait Red Crescent Society, P.O. Box 1359, *Kuwait*.
- LAOS — Lao Red Cross, P.B. 650, *Vientiane*.
- LEBANON — Lebanese Red Cross, rue Général Spears, *Beirut*.
- LESOTHO — Lesotho Red Cross Society, P.O. Box 366, *Maseru*.

- LIBERIA — Liberian National Red Cross, National Headquarters, 107 Lynch Street, P.O. Box 226, *Monrovia*.
- LIBYAN ARAB REPUBLIC — Libyan Arab Red Crescent, P.O. Box 541, *Benghazi*.
- LIECHTENSTEIN — Liechtenstein Red Cross, *Vaduz*.
- LUXEMBOURG — Luxembourg Red Cross, Parc de la Ville, C.P. 1806, *Luxembourg*.
- MALAGASY REPUBLIC — Red Cross Society of the Malagasy Republic, rue Clémenceau, P.O. Box 1168, *Tananarive*.
- MALAWI — Malawi Red Cross, Hall Road, *Blantyre* (P.O. Box 30080, Chichiri, *Blantyre* 3).
- MALAYSIA — Malaysian Red Cross Society, 519 Jalan Belfield, *Kuala Lumpur*.
- MALI — Mali Red Cross, B.P. 280, route de Koulikora, *Bamako*.
- MAURITANIA — Mauritanian Red Crescent Society, B.P. 344, Avenue Gamal Abdel Nasser, *Nouakchott*.
- MEXICO — Mexican Red Cross, Avenida Ejército Nacional n° 1032, *México 10 D.F.*
- MONACO — Red Cross of Monaco, 27 boul. de Suisse, *Monte Carlo*.
- MONGOLIA — Red Cross Society of the Mongolian People's Republic, Central Post Office, Post Box 537, *Ulan Bator*.
- MOROCCO — Moroccan Red Crescent, B.P. 189, *Rabat*.
- NEPAL — Nepal Red Cross Society, Tahachal, P.B. 217, *Kathmandu*.
- NETHERLANDS — Netherlands Red Cross, 27 Prinsessegracht, *The Hague*.
- NEW ZEALAND — New Zealand Red Cross, Red Cross House, 14 Hill Street, *Wellington 1* (P.O. Box 12-140, *Wellington North*).
- NICARAGUA — Nicaraguan Red Cross, *Managua, D.N.*
- NIGER — Red Cross Society of Niger, B.P. 386, *Niamey*.
- NIGERIA — Nigerian Red Cross Society, Eko Aketa Close, off St. Gregory Rd., P.O. Box 764, *Lagos*.
- NORWAY — Norwegian Red Cross, Parkveien 33b, *Oslo*. Mail Add.: *Postboks 7034 H-Oslo 3*.
- PAKISTAN — Pakistan Red Crescent Society, Dr Daudpota Road, *Karachi 4*.
- PANAMA — Panamanian Red Cross, Apartado Postal 668, Zona 1, *Panamá*.
- PARAGUAY — Paraguayan Red Cross, Brasil 216, *Asunción*.
- PERU — Peruvian Red Cross, Jirón Cancay 881, *Lima*.
- PHILIPPINES — Philippine National Red Cross, 860 United Nations Avenue, P.O.B. 280, *Manila D-406*.
- POLAND — Polish Red Cross, Mokotowska 14, *Warsaw*.
- PORTUGAL — Portuguese Red Cross, Jardim 9 de Abril, 1 a 5, *Lisbon 3*.
- ROMANIA — Red Cross of the Socialist Republic of Romania, Strada Biserica Amzei 29, *Bucarest*.
- SAN MARINO — San Marino Red Cross, Palais gouvernemental, *San Marino*.
- SAUDI ARABIA — Saudi Arabian Red Crescent, *Riyadh*.
- SENEGAL — Senegalese Red Cross Society, Bld Franklin-Roosevelt, P.O.B. 299, *Dakar*.
- SIERRA LEONE — Sierra Leone Red Cross Society, 6A, Liverpool Street, P.O.B. 427, *Freetown*.
- SINGAPORE — Singapore Red Cross Society, 15, Penang Lane, *Singapore 9*.
- SOMALI REPUBLIC — Somali Red Crescent Society, P.O. Box 937, *Mogadishu*.
- SOUTH AFRICA — South African Red Cross, Cor. Kruis & Market Streets, P.O.B. 8726, *Johannesburg 2000*.
- SPAIN — Spanish Red Cross, Eduardo Dato 16, *Madrid 10*.
- SRI LANKA — Sri Lanka Red Cross Society, 106 Dharmapala Mawatha, *Colombo 7*.
- SUDAN — Sudanese Red Crescent, P.O. Box 235, *Khartoum*.
- SWEDEN — Swedish Red Cross, Fack, S-104 40 *Stockholm 14*.
- SWITZERLAND — Swiss Red Cross, Taubenstrasse 8, B.P. 2699, *3001 Berne*.
- SYRIAN ARAB REPUBLIC — Syrian Red Crescent, Bd Mahdi Ben Barake, *Damascus*.
- TANZANIA — Tanzania Red Cross Society, Upanga Road, P.O.B. 1133, *Dar es Salaam*.
- THAILAND — Thai Red Cross Society, Paribatra Building, Chulalongkorn Memorial Hospital, *Bangkok*.
- TOGO — Togolese Red Cross Society, 51, rue Boko Soga, P.O. Box 655, *Lomé*.
- TRINIDAD AND TOBAGO — Trinidad and Tobago Red Cross Society, Wrightson Road West, P.O. Box 357, *Port of Spain, Trinidad, West Indies*.
- TUNISIA — Tunisian Red Crescent, 19 rue d'Angleterre, *Tunis*.
- TURKEY — Turkish Red Crescent, Yenisehir, *Ankara*.
- UGANDA — Uganda Red Cross, Nabunya Road, P.O. Box 494, *Kampala*.
- UNITED KINGDOM — British Red Cross, 9 Grosvenor Crescent, *London, SW1X 7EJ*.
- UPPER VOLTA — Upper Volta Red Cross, P.O.B. 340, *Ouagadougou*.
- URUGUAY — Uruguayan Red Cross, Avenida 8 de Octubre 2990, *Montevideo*.
- U.S.A. — American National Red Cross, 17th and D Streets, N.W., *Washington, D.C. 20006*.
- U.S.S.R. — Alliance of Red Cross and Red Crescent Societies, Tcheremushki, I. Tcheremushkinskii proezd 5, *Moscow B-36*.
- VENEZUELA — Venezuelan Red Cross, Avenida Andrés Bello No. 4, Apart. 3185, *Caracas*.
- VIET NAM, DEMOCRATIC REPUBLIC OF — Red Cross of the Democratic Republic of Viet Nam, 68 rue Bà-Triêu, *Hanoi*.
- VIET NAM, REPUBLIC OF — Red Cross of the Republic of Viet Nam, 201 duong Hông-Thập-Tu, *Saigon*.
- YUGOSLAVIA — Red Cross of Yugoslavia, Simina ulica broj 19, *Belgrade*.
- ZAIRE (Republic of) — Red Cross of the Republic of Zaire, 41 av. de la Justice, B.P. 1712, *Kinshasa*.
- ZAMBIA — Zambia Red Cross, P.O. Box R.W.1, 2837 Brentwood Drive, *Lusaka*.